228376

STATE OF SOUTH CAROLINA)
) BEFORE THE
(Caption of Case)) PUBLIC SERVICE COMMISSION
Example: Application for a Class C Charter Certificate from) OF SOUTH CAROLINA
John Doe dba Doe's Limo	TRANSPORTATION COVER SHEET
Application for new Close C Charles)
Conso C Charles) DOCKET NUMBER: 2011 - 99 - 1
) NUMBER: $\frac{2011}{2011} - \frac{101}{2011} - \frac{1}{2011}$
	If this is your first time filing an application with the PSC, you will not
	have a Docket Number. The Commission will assign one to you. If you
	have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print)	T. I. (5.12) 62.10
Submitted by: walter L. Compton	Telephone: (843) 373-9009
Address: 373 Strand Industrial	Fax:
Dr. Little River, SC 2951d	Other:
	Email:
	laces nor supplements the filing and service of pleadings or other papers
as required by law. This form is required for use by the Public Service be filled out completely.	ce Commission of South Carolina for the purpose of docketing and must
	ON (Check all that apply)
narott of Acric	or (Cheek an that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter Application - Class C Charter Bus	Request to Amend Tariff (rate increase, etc.)
	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request
Application - Class C Stretcher Van	□ Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificat	te Reservation Letter
of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate RECEIV	Return to Petition
Request for Suspension	///// Other:
Request for Reinstatement	
PSCS	C MS
If you have any questions about this form, please confact t	he PUBLIC SERVICE COMMISSION at 803-896-5100.

JBS

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date: 3/03/11
CLASS C - CHARTER	
Application is hereby made for a Certificate of Public Co of S.C. Code Ann., § 58-23-10, et seq. (1976), and amend	onvenience and Necessity, in accordance with the provision dments thereto.
1. Name under which business is to be conducted (corporation	n, partnership, or sole proprietorship, with or without trade name.
Walter L. Compton	
dba: North Myrtle Beach	
373 Strand Industrial	Dr. Little River, SC 29566 ant if different from street address
	int if different from street address
(843) 272-9009 Phone	Fax
1.15.15	
Ema	ail Address
2. If incorporated, a copy of Articles of Incorporation m Secretary of State "Foreign Corporation" Certificate.)	· -
3. Select Entity Type: (Check one)	
☐ Individual Owner/Sole Proprietorship☐ Partnership - List names and address of all person	on having an interest in the husiness
Corporation - List names and addresses of two pr	
Corporation - List names and addresses of two pr	merpar officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

	Balance at Time Application is Filed: Month Year
Assets:	
Cash	1,500.00
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepaids and Other Assets	
Total Assets	1,500.00
Liabilities and Equity:	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	0
Total Liabilities and Equity	1,500.00

PROPOSED RATES AND CHARGES FOR SERVICE

Mariana Danas d Data d Cl	C. C		
Maximum Proposed Rates and Charges for Service are as follows:			
Grad 08.6 of	mole		
+ 1			
Counties to be Served:			
betmilner			
Maximum Number of Passengers per	· Vehicle:		
5			

DESCRIPTION OF EQUIPMENT

					WEIGHT	SEATING
MAKE	Y	EAR & MODEL	V	IN#	EMPTY	CAPACITY
70	Be	EAR & MODEL	ine ale an	Sota	date	15
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			1911 	****		
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INSURANCE QUOTE

This form <u>MUST BE COMPLETED AND SIGNED</u> by an <u>AUTHORIZED INSURANCE COMPANY REPRESENTATIVE</u>. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

The following insurance quote is for:

Walter L. Compton	Name of Motor Carrier
373 Strand Industri	Address of Motor Carrier
Amount of Premium:	Limits Quoted: (See Below)
E.Ox.	
Liability Insurance \$ 3, Loole C	Limits 100/300/100
The above quoted premium is for a terr	m of months.
Minimum Limits - Intrastate Only:	
1-7 Passengers	\$ 25,000/50,000/25,000
8-15 Passengers	\$ 25,000/100,000/25,000
· · · · · ·	·, · · · · · · · · · · · · · · · · ·
L	
Stormat Duama	Name of Insurance Company
clos Star Spacio	amayand good
158 N. Hardon Ci	•
	Home Office Address of Company
I am familiar with the Commission's Ru	ales and Regulations relating to insurance requirements and the above quote

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

3/03/11 Jate

de I e bis Authorized Insurance Company Representative's Signature

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor Vehicles at (803) 896-8457.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit FWA

whose & Compton	deson isolo.	astrum.	Road Tox:
•	Name of Applicant		

1.	Are there currently any or O Yes	utstanding judgments against the Applicant? No
	If Yes, indicate nature of	judgement(s) against applicant.
		•
2.	Is Applicant familiar with carrier operations in Soutl statutes and regulations?	all statutes and regulations, including safety regulations and governing for-hire motor a South Carolina, and does Applicant agree to operate in compliance with these
	Q Yes .	○ No
3.	Is Applicant aware of the therewith?	Commission's insurance requirements and the insurance premium costs associated
	Yes	○ No

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14.

Exhibit on Driver Qualifications

1.	. Applicant und	erstands that	all driv	rers must be a minimum of 18 years of age.
	Q Yes		O N	Ю
2.	Applicant und and such recorbe maintained	d from the L	MV of	ied copy of the driver's three (3) year driving record issued by the SC DMV the state in which the driver is or has been domiciled for such period must usiness office.
	Ves		O N	Ю
3.	Applicant und	erstands that ained in the	a crimi Applica	nal history background check from the state where the driver currently lives nt's business office.
	Q Yes		O N	o
		. 1		
4.	Applicant under their possession state of residen	n when opera	ating a c	ers operating a vehicle under a Class C Charter Certificate must have in charter vehicle, a valid driver's license issued by the SC DMV or the current
	① Yes	d) -: 31	O N	o
5.	vehicles to driv	ers who are	register	s C Charter Certificate holders are prohibited from employing or leasing ed, or required to be registered, as sex offenders with the South Carolina r any national registry of sex offenders.
	O Yes	, !	0 1	40
		$\mathcal{N}_{p,p}^{r}(\mathbf{f})$		
		. , ;		
		1 13. 2. :		

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

	TE OF SOUTH CAROLINA))	Walte L. Compton
	· ·		Applicant's Signature
I,	Name of Applicant's Re	presentative	Title
of	varsicherso	Bons	Applicant
the A	Applicant for the Certificate of P m that all statements contained i	ublic Conveni n the above ap	nience and Necessity as set forth in the foregoing, swear or application are true and correct.
			Walter S. Compton
	4 4		Signature of Applicant's Representative

Commission Expires 9/12/15

1. J.v. 18.1